UNIVERSITY OF CALIFORNIA, LOS ANGELES, Fielding School of Public Health
International Internships/Field Studies for Masters of Public Health Students

Waiver of Liability, Assumption of Risk & Indemnity Agreement

Waiver: In consideration of being permitted to participate in any way in

_____for_____
Country   Project Name/Description   Quarter, Year

and any associated activities, hereinafter collectively called "Activity," I, for myself, my heirs, personal representatives or assigns, **do hereby release, waive, discharge, and covenant not to sue** The Regents of the University of California, its officers, employees, and agents from liability **from any and all claims** resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in Activity.

Assumption of Risks: Participation in Activity carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The risks may arise from a variety of sources, including crime, terrorism, civil and political unrest, disease, and accidents. The specific risks vary from one activity to another, but potential injuries are physical, mental, emotional, and financial, and include catastrophic injuries such as paralysis and death. **I have read the previous paragraphs and I know, understand, and appreciate these and other risks that are inherent** in Activity. I hereby **assert that my participation is voluntary and that I knowingly assume all such risks.**

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney's fees brought as a result of my involvement in Activity, and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgement of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue**. I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law.

_____
Signature of Participant   Print Name   Date

This Form Cannot be Altered Except with the Express Permission of Counsel for UCLA.